



## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or **Fax** (571)-273-2885

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

44183 7590 04/10/2006  
**BAXTER HEALTHCARE CORPORATION**  
 ONE BAXTER PARKWAY  
 MAIL STOP DF2-2E  
 DEERFIELD, IL 60015

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mary Stickle (Depositor's name)  
 Mary Stickle (Signature)  
 June 28, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/486,516	06/07/2000	HEINZ REDL	BHV-317.01	5257

TITLE OF INVENTION: FIBRINOGEN-BASED TISSUE ADHESIVE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	07/10/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MELLER, MICHAEL V	1635	435-183000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached  
☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev. 03-02 or minor revision) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having no a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Townsend and Townsend  
 and Crew LLP  
 2  
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.12. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Baxter Aktiengesellschaft

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

Vicenna, Austria

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-1440 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) as to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Janice Guthrie, Ph.D.

Date 6/27/06

Registration No. 35,170

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**Facsimile Cover Sheet**

**To:** Mail Stop Issue Fee  
**Company:** USPTO  
**Phone:**  
**Fax:** (571) 273-2885

**From:** Mary Stickle  
**Legal Assistant**

**Company:** Baxter Healthcare Corp.  
P. O. Box 15210  
Irvine, CA 92623-5210

**Phone:** (949) 474-6450  
**Fax:** (949) 474-6330

**Date:** June 28, 2006

**Pages including this cover page:** 3

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**Re:** Form PTOL-85, Part B – Fee Transmittal (in duplicate) for  
U.S. Serial No. 09/486,516 filed 06/07/2000  
Baxter Docket No. WM-206.00

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***Certificate of Facsimile Transmission***

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By Mary Stickle  
Mary Stickle

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